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UTILITY PATENT APPLICATION **TRANSMITTAL**

First Inventor **TERRY THOMAS** Method For Separating Cells Using Immunorosettes Title Express Mail Label No.

7771-110

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

APPLICATION ELEMENTS				Α	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450				
See MPEP chapter 600 concerning utility patent application contents.									,
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. Applicant claims small entity status. See 37 CFR 1.27. 3. Specification [Total Pages [59]] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix					Alexandria VA 22313-1450 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS				
- Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. ☑ Drawing(s) (35 U.S.C.113) [Total Sheets 1] 5. Oath or Declaration [Total Sheets 1] a. ☐ Newly executed (original or copy) b. ☑ Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed) i. ☐ DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. ☑ Application Data Sheet. See 37 CFR 1.76				10 11 11 12 13 14 14 18	9. Assignment Papers (cover sheet & document(s)) 10. 37 C.F.R. 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.				
18. If a CON	TINUING APPLIC	CATION, check a	opropriate box, and sui	ply the	requisite	information be	low and in a	preliminary amendment	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: ☐ Continuation ☑ Divisional ☐ Continuation-in-part (CIP) of prior application No: 09 / 822,823 Prior application information: Examiner DAVID A. SAUNDERS Art Unit: 1644 For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
			19. CORRESP	ONDE	NCE AD	DRESS			
☑ Customer Number			1059		OR Correspondence address below				
Name									
Address									
City			2				0.1		
Country			State Telephone			Zip	Code Fax		
Name (Print/	Туре)	MICHELINE GRA		Regist	egistration No. (Attorney/Agent) 40,261				
Signature . Signature			Showel	\mathcal{W})		Date	APRIL 14, 2004	

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mall Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (10-03)
Approved for use through 07/31/2006. OMB 0651-0032
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TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

385.00
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spend to a consector of information unless it displays a valid ONIB control flumber.						
Complete if Known						
Application Number						
Filing Date						
First Named Inventor	TERRY THOMAS					
Examiner Name						
Art Unit						
Attorney Docket No.	7771-110					

METH	FEE CALCULATION (continued)						
Check Credit card Money Other None			3. ADDITIONAL FEES				
Deposit Account:			Large Entity Small Entity				
Deposit		Fee Code	Fee (\$)		Fee (\$)	Fee Description	Con Doid
Account Number	022095	1051	130	2051		Surcharge - late filing fee or oath	Fee Paid
Deposit Account	Bereskin & Parr	1052	50	2052	25	Surcharge - late provisional filing fee or	
Name		1053	130	1053	120	cover sheet Non-English specification	
The Director is authorized to: (check all that apply)			2.520	1812		For filing a request for ex parte reexamination	
Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) or any underpayment of fee(s)			920*	1804		Requesting publication of SIR prior to	
_	(s) indicated below, except for the filing fee					Examiner action	
	entified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
	FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FI	LING FEE	1252	420	2252	210	Extension for reply within second month	
Large Entity S		1253	950	2253	475	Extension for reply within third month	
	Fee Fee Paid Code (\$) Fee Description Fee Paid	1254	1,480	2254	740	Extension for reply within fourth month	
1001 770	2001 385 Utility filing fee 385.00	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340	2002 170 Design filing fee 383.00	1401	330	2401	165	Notice of Appeal	
1003 530	2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770	2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160	2005 80 Provisional filing fee	1451	1,510	·1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 385.00			110	2452	55	Petition to revive - unavoidable	
2 FXTRA C	CLAIM FEES FOR UTILITY AND REISSUE	1453	1,330	2453	665	Petition to revive - unintentional	
Fee from			1,330	2501	665	Utility issue fee (or reissue)	
Extra Claims Delow Fee Paid			480	2502		Design issue fee	
			640	2503		Plant issue fee	
			130	1460		Petitions to the Commissioner	<u> </u>
			50	1807		Processing fee under 37 CFR 1.17(q)	
Fee Fee	Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$) 1202 18	Code (\$) 2202 9 Claims in excess of 20	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1202 16	2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 290	2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be	
1204 86	2204 43 ** Reissue independent claims			20.0	. 505	examined (37 CFR 1.129(b))	
	over original patent	1801	770	2801		Request for Continued Examination (RCE)	
1205 18	2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 0.00			Other fee (specify)				
**or number previously paid, if greater; For Reissues, see above			ced by	Basic F	iling F	ee Paid SUBTOTAL (3) (\$)	0.00

SUBMITTED BY		(Complete ((Complete (if applicable))		
Name (Print/Type)	MICHELINE GRAVELINE	Registration No. (Attorney/Agent) 40,26	Telephone	(416) 364-7311	
Signature	W HOW ell	loi	Date	APRIL 14. 2004	

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